PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number 09/595925

CLAIMS AS FILED - PART I							SMALL ENTITY		_	OTHER THAN OR SMALL ENTITY				
			(Column	1) (Column 2)			TYPE [OR	SMALL	ENTITY			
TOTAL CLAIMS							RATE	FEE		RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	395.∞	OR	BASIC FEE	790.00			
TOTAL CHARGEABLE CLAIMS			minus 20=		•		x		ΩR	×				
INDEPENDENT CLAIMS			minus 3 =				×		OR	X				
М	JLTIPLE DEPEN	IDENT CLAIM PI	RESENT				+		OR	+				
* 11	the difference	in column 1 is	less than zero, enter "0" in column			olunn 2	TOTAL		OR	TOTAL.				
	. С	• •	MENDED - PARȚ II (Column 2) (Column 3)				SMALL E	ENTITY	OB.	OTHER SMALL				
	1401	(Column 1) Craims		(COID)		(Commun 2)		NE (0)			ADDI			
AMENDMENT A	10/1/4	HEMAINING AFTER AMENDMENT		NUM PREVIC PAID I	oustr	CKLR9 CKLR9	HATE	TIONAL FEE	-	HATE	TIONAL FEE			
	Total	. 18	Minus	ථ	0	= \	×		OR	×				
	Independent	· 2	Minus	***	3	-	x		OR	×				
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +								OR					
TOTAL ADDIT FEE									OR	TOTAL ADDIT FEE				
(Column 1) (Column 2) (Column 3)														
Γ	127	CLAIMS		нібн		100.0	Γ	ADDI:		<u> </u>	ADDI-			
AMENDMENT B	7/24/5	REMAINING AFTER		MUM GIVE GIVE	9054	PRESENT EYTRA	RATE	TIONAL FEE		₽4TE	TIONAL FEE			
	Total	- X	Minos	. 6	10		x	1	QH.	×				
	Inaependent	· 2	Minus	***	3	= ·	×		OR	. ×				
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+									OH	\ <u>'</u>	1.			
	i OTAL ADDIT LES								OR	TOTAL ADDIT FEE				
		(Column 1)		(Colur	nn 2)	(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	AUÜI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•	Minus	era .		=	×		OR	XS				
	Independent	*	Minus	***		=	` X		QR	X	·			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									\				
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 							†		OR	TOTAL	 			
	→ If the *Highest Number Previously Paid For* IN THIS SPACE is less than 20, enter "20."								OR	ADDIT. FEE				
***	ll the "Highest Nu The "Highest Num	mber Previously Pa ober Previously Pai	** If the *Highest Number Previously Paid For* (N THIS SPACE is less than 20, enter "20." ***If the *Highest Number Previously Paid For* (N THIS SPACE is less than 3, enter "3." The *Highest Number Previously Paid For* (Total or Independent) is the highest number found in the appropriate box in column 1.											